



RCE/1713  
IFW

Patent  
Attorney Docket No. 000515-237

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of  
Jeff THORNTON et al.  
Application No.: 10/053,646  
Filing Date: January 24, 2002  
Title: RECOVERY METHOD

MAIL STOP RCE

Group Art Unit: 1713  
Examiner: RIP A LEE  
Confirmation No.: 3600

REQUEST FOR CONTINUED EXAMINATION  
TRANSMITTAL LETTER

MAIL STOP RCE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer Number 21839

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the

☐ \$395.00 (2801) ☒ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. ☒ A. Applicant(s) requests that any previously unentered after final amendments not be entered.  
Continued examination is requested based on the enclosed documents identified in item 2 below.

☐ B. Applicant(s) previously submitted the following documents for which continued examination is requested:

☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on \_\_\_\_\_

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_

☐ Other: \_\_\_\_\_

2. The following documents are enclosed with this submission:

☒ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☐ Information Disclosure Statement (IDS).

☐ A Petition for Extension of Time.

☐ Other: \_\_\_\_\_

12/29/2004 EABUBAK1 00000056 10053646

01 FC:1801

790.00 OP

02 FC:1201

400.00 OP

3. ☐ Small entity status is hereby claimed.  
☐ No additional claim fee is required.  
☒ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

CLAIMS					
	No. of Claims		Extra Claims	Rate	Fee
Examination Fee (1801)					\$ 790.00
Total Claims	17	MINUS 25 =	0	x \$50.00 (1202) =	\$ 0.00
Independent Claims	5	MINUS 3 =	2	x \$200.00 (1201) =	\$ 400.00
If multiple dependent claims are presented, add \$360.00 (1203)					
Total Fee					\$ 1,190.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					
TOTAL FEE DUE					
					\$ 1,190.00

4. ☒ A check in the amount of \$ 1,190.00 is enclosed for the fee due.  
5. ☒ Charge \_\_\_\_\_ to Deposit Account No. 02-4800 for the fee due.  
6. ☐ Charge \_\_\_\_\_ to credit card. Form PTO-2038 is attached.  
7. ☐ Applicant(s) requests suspension of action by the Office until at least \_\_\_\_\_, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

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